

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PNV	62814	9/30/55
O.I.P.E. CLASSIFIER		12	10/16
FORMALITY REVIEW	PNV	71423	10-15-59

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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50	✓

Claim	Date
Final Original	
51	✓
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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